## Case 16-12046 Doc 1 Filed 04/08/16 Entered 04/08/16 13:58:45 Desc Main Document Page 1 of 64

Fill in this information to identify	your case:	
United States Bankruptcy Court for Northern District of Illinois	the:	
Case number (# known):		Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

APR 0 8 2016

Check if this is RK

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	art 1: Identify Yourself		
1	Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Eva First name Jean Middle name Beamon Last name Suffix (Sr., Jr., II, III)	Willie First name  Middle name Beamon Last name Jr Suffix (Sr., Jr., II, III)
	All other names you have used in the last 8 years Include your married or maiden names.	Eva First name Jean Middle name Nelson Last name	First name  Middle name
		First name Middle name	First name  Middle name
		Last name	Last name
1	number or federal ndividual Taxnaver	xxx - xx - <u>9 4 9 2</u> OR <b>9</b> xx - xx	xxx - xx - <u>0</u> <u>8</u> <u>3</u> <u>4</u> OR  9 xx - xx

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Debtor 1		ean dle Name	Beamon Last Name	2700000		Case number (if know	2)		
		About	Debtor 1:		Halish was about process and a	About Deht	or 2 (Spouse Only in	عدده	
and En Identifi	cation Numbers	\$	ave not used any bus	iness names	or EINs.		at used any business na		
the last include t	ou have used in t 8 years rade names and	Busines	s name		***************************************	Business nam	9		<del>77 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7</del>
doing bu	siness as names	Busines	s name	****		Business nam	3		
		EIN	. —			EIN			
		EIN				EIN			
Where y	ou live					lf Debtor 2 li	ves at a different add	ress:	
		1255 S Number	Street Street			Number S	treet		
		Apt 11	11						
		Chicaç City	jo	IL State	60605 ZIP Code	City	S	tate	ZIP Code
		Cook County			<u></u>	County			
		above, f	nailing address is d fill it in here. Note th ces to you at this mai	at the court w	the one vill send	yours, fill it ir	mailing address is dif here. Note that the co this mailing address.	feren ourt w	t from ill send
		Number	Street	····		Number St	reet		<del> </del>
		P.O. Box				P.O. Box			
Secretary and the secretary secretary secretary secretary secretary secretary secretary secretary secretary sec	ad kiiba dianisa aya masa kiiba kiiba dianisinda ya kiiba dianisinda ya kiiba dianisa ka kiiba dianisa ka kiib	City	one announce of the first of th	State	ZIP Code	City	St	ate	ZIP Code
	are choosing ict to file for cy	I have	ne: the last 180 days bef a lived in this district l district.	ore filing this onger than in	petition, any	Check one: Over the la: I have lived other distric	st 180 days before filing in this district longer th t.	this an in	petition, any
		☐ I have (See 2	another reason. Exp 28 U.S.C. § 1408.)	olain.		I have anoti (See 28 U.S	ner reason. Explain. S.C. § 1408.)		
		*******				440000000000000000000000000000000000000			

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Pebtor 1 EVA Je First Name Middle I		Beam(	<u> </u>		Case number (	if known)
Tell the Court Ab	out Your	Bankrupto	cy Case			
The chapter of the Bankruptcy Code you	Check for Bai	one. (For a	brief description o	of each, see <i>No</i> go to the top of g	tice Required by 1 page 1 and check	11 U.S.C. § 342(b) for Individuals Filing the appropriate box.
are choosing to file under		apter 7				
	🔲 Ch	apter 11				
	☐ Ch	apter 12				
	☐ Ch	apter 13				
How you will pay the fee	you subt with with App	arcourt for urself, you romitting you not pre-pring the pay offication for quest that law, a judge than 150% the fee in i	may pay with caur payment on y nited address.  the fee in instant Individuals to F my fee be waite may, but is no for the official printstallments), If-	sh, cashier's our behalf, you behalf, you behalf, you may trequired to, poverty line the you choose the should be sh	may pay. Typica check, or money our attorney may bu choose this op Fee in Installment or request this opi waive your fee, at applies to your is option, your mis option, your may be checked.	neck with the clerk's office in your ally, if you are paying the fee yorder. If your attorney is pay with a credit card or check ption, sign and attach the ents (Official Form 103A).  It you are filing for Chapter 7 and may do so only if your income is aur family size and you are unable to nust fill out the Application to Have the with your petition.
Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.	District		100h o		
last o years:	<b>—</b> 103.				MM / DD / YYYY	Case number
		District		When	MM / DD / YYYY	Case number
				¥¥11631	MM / DD / YYYY	Case number
Are any bankruptcy	☑ No					
cases pending or being iled by a spouse who is	TYes.	Debtor			VIII.	Relationship to you
not filing this case with ou, or by a business partner, or by an affiliate?						Case number, if known
minate?		Debtor				
				When		Relationship to you
					MM / DD / YYYY	Case number, if known
0o you rent your esidence?		Go to line 12 Has your lar residence?	2.			ind do you want to stay in your
		🛭 No. Go t	to fine 12.			
						Against You (Form 101A) and file it with

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Debtor 1	Eva First Name	Jean Middle Name	Beamon Last Name	Case number (# known)
	_			
Part 3:	Report Abou	t Any Busines	sses You Own as a S	iole Proprietor
	you a sole prop ny full- or part-ti		. Go to Part 4.	
busi	ness?	☐ Ye	s. Name and location of t	business
busin indivi separ a corp	e proprietorship is ess you operate as dual, and is not a rate legal entity suc poration, partnersh	s an ch as	Name of business, if any	
LLC.	have more than o	ne.	Number Street	
sole p separ	proprietorship, use ate sheet and atta	а		
to this	s petition.		City	State ZIP Code
			Check the appropriate	box to describe your business:
			Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				(as defined in 11 U.S.C. § 101(6))
			None of the above	
Chap Bank are y debte For a busing	rou filing under ster 11 of the cruptcy Code an ou a small busi or? definition of small ses debtor, see S.C. § 101(51D).	can sea most re any of	t appropriate deadlines. It seent balance sheet, state these documents do not on the am not filing under Ch	1, the court must know whether you are a small business debtor so that it if you indicate that you are a small business debtor, you must attach your ement of operations, cash-flow statement, and federal income tax return or if exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  napter 11.  er 11, but I am NOT a small business debtor according to the definition in
		☐ Yes	, ,	er 11 and I am a small business debtor according to the definition in the
Part 4:	Report if You	Own or Have		perty or Any Property That Needs Immediate Attention
	ou own or have erty that poses			
allege of imi identi public	ed to pose a throminent and findle hazard to the health or safe	eat U Yes	. What is the hazard?	
prope	you own any erty that needs diate attention?	•	If immediate attention	is needed, why is it needed?
perisha that mi	ample, do you own able goods, or lives ust be fed, or a bui eds urgent repairs	stock Iding		
			Where is the property?	Rumber Street
				City State ZIP Code

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Debtor 1 Eva Jean Beamon Case number (# known)

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

<b>About</b>	Debtor	1	•
--------------	--------	---	---

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed,

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am no	t required	to	receive	а	briefing	about
	ounseling					

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability cause

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am not re	equired to	receive a	briefing	about
credit cou	nseling be	ecause of		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1	EVA Je First Name Middle N	an Beamon  Lest Name	Case number (ir)	(nown)
Part 6:	Answer These Que	estions for Reporting Purp	oses	
16. What k	ind of debts do ve?	as incarred by arrandivi	narily consumer debts? Consumer de idual primarily for a personal, family, or ho	bts are defined in 11 U.S.C. § 101(8) usehold purpose."
		☐ No. Go to line 16b. ☐ Yes. Go to line 17.		
		No. Go to line 16c.	parily business debts? Business debts investment or through the operation of the	s are debts that you incurred to obtain e business or investment.
		Yes. Go to line 17.  16c. State the type of debts y	ou owe that are not consumer debts or bu	siness debts.
MANGARIAN KANTILANIAN KANTILANIAN KANTILANIAN KANTILANIAN KANTILANIAN KANTILANIAN KANTILANIAN KANTILANIAN KANTI	g der finde der verschen der Stelle			
17. Are you Chapter	filing under 7?	☐ No. I am not filing under	Chapter 7. Go to line 18.	
any exe exclude adminis are paid available	estimate that after mpt property is d and trative expenses that funds will be e for distribution cured creditors?	✓ No	pter 7. Do you estimate that after any exer ses are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?
8. How ma	ny creditors do	_ 1-49	1,000-5,000	$ \qquad \qquad$
owe?	mate that you	50-99 100-199 200-999	☐ 5,001-10,000 ☐ 10,001-25,000	50,001-100,000 More than 100,000
9. How muestimate be worth	your assets to	✓ \$0-\$50,000  □ \$50,001-\$100,000  □ \$100,001-\$500,000  □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion
	ch do you your liabilities	<b>2</b> \$0-\$50,000 <b>□</b> \$50,001-\$100,000 <b>□</b> \$100,001-\$500,000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
art 7: Si	gn Below	□ \$500,001-\$1 million	□ \$100,000,001-\$500 million	☐ More than \$50 billion
or you		I have examined this petition, a correct.	and I declare under penalty of perjury that t	he information provided is true and
		If I have chosen to file under Chof title 11, United States Code, under Chapter 7.	napter 7, I am aware that I may proceed, if I understand the relief available under eac	eligible, under Chapter 7, 11,12, or 13 th chapter, and I choose to proceed
		If no attorney represents me an this document, I have obtained	d I did not pay or agree to pay someone wand read the notice required by 11 U.S.C.	who is not an attorney to help me fill out § 342(b).
			ith the chapter of title 11, United States Co	
	i i	with a bankruptcy case can result 18 U.S.C. \$5 152, 1341, 1519, a	tement, concealing property, or obtaining out in fines up to \$250,000, or imprisonment and \$271.	money or property by fraud in connection it for up to 20 years, or both.
	Ì	* You for	Deamon * Wer	lee Beamon Je
		Signature of Debtor 6  Executed on MM / DD / 19	Signature 20/6 Executed of	of Debtor 2

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For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this p to proceed under Chapter 7, 11, 12, or 13 of to available under each chapter for who the per	le 11, United States Code, a son is eligible. I also certify :	nd have explained the relief
f you are not represented by an attorney, you do not	the notice required by 11 U.S.C. § 342(b) and, knowledge after an inquiry that the information	ID a case in which & 707/b)/	1)(D) applies cortificated bases as
need to file this page.	×	Date	
	Signature of Attorney for Debtor		MM / DD /YYYY
	Printed name		
	Firm name		
	Number Street		- VARANTANA - VARA
	City	Ctob	
		State	ZIP Code
	Contact phone	Email address	
	Bar number	State	

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Debtor 1 Eva Jean Nelson Case number (# known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious actionsequences?  No Yes	on with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprisor No  Yes	
Did you pay or agree to pay someone who is not an atto No Yes. Name of Person	
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I  Signature of Debtor 1  Date  MM/DD / YYYY	nat filing a bankruptcy case without an
Contact phone (312) 388-9538	Contact phone (312) 388-9538
Cell phone (773) 490-5554  Email address evabeamon@yahoo.com	Cell phone (773) 577-0241  Email address wbeamonjr@yahoo.com

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Debtor 1	Eva	Jean	Beamon
	First Name	Middle Name	Last Name
Debtor 2	Willie		Beamon Jr.
(Spouse, if filing)	First Name	Middle Name	Last Name
	Bankruptcy Court fo	r the: Northern District of II	linois
Case number	(If known)		Passananananyy

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$ 0.00
ta. Copy into co, Total real estate, none schedule A/B	. \$
1b. Copy line 62, Total personal property, from Schedule A/B	. \$1,555.00
1c. Copy line 63, Total of all property on Schedule A/B	
	\$ 1,555.00
Part 2: Summarize Your Liabilities	
	Your liabilities
Schedule D. Craditora Who Have Claims Seawed to Burnet (00%) 15	Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$ 0.00
<ol> <li>Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F</li> </ol>	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	
7, The state of th	<b>+</b> \$ 21,871.34
Manuscript Land	\$ 21,871.34
Your total liabilities	\$ 21,871.34
Part 3: Summarize Your Income and Expenses	
t. Schedule I: Your Income (Official Form 106I)	s 1.826.00
Copy your combined monthly income from line 12 of Schedule I	3
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22e of Schedule J.	s 1,811.00
Copy your monthly expenses from line 22c of Schedule J	\$

Case 16-12046 Doc 1 Filed 04/08/16 Entered 04/08/16 13:58:45 Desc Main Document Page 10 of 64 Eva Jean Debtor 1 Case number (if known) Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 1,810.00 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$ 579.00

9g. Total. Add lines 9a through 9f.

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Debtor 1	Eva	Jean	Beamon
	First Name	Middle Name	Last Name
Debtor 2	Willie		Beamon Jr
Spouse, if filing)	First Name	Middle Name	Last Name
Jnited States	Bankruptcy Court fo	r the: Northern District of I	Illinois

☐ Check if this is an amended filing

#### Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest Ir

No. Go to Part 2.  Yes. Where is the property?			
1.1. Street address, if available, or other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	the amount of any secure Creditors Who Have Clai	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property.
	— 🔲 Land	\$	portion you own? \$
City State ZIP Cod	Investment property Timeshare Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		e estate), ii known.
County	<ul> <li>□ Debtor 1 only</li> <li>□ Debtor 2 only</li> <li>□ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> </ul>	Check if this is co	emmunity property
	Other information you wish to add about this it	em, such as local	
If you own or hove more than and list have	property identification number:		
1.2. Street address, if available, or other description.	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	Do not deduct secured dathe amount of any secure Creditors Who Have Clair.	d claims on Schedule D: ns Secured by Property.
	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	Do not deduct secured cla	d claims on Schedule D: ns Secured by Property.
12	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land	Do not deduct secured dathe amount of any secure Creditors Who Have Clair.  Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
12	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare  Other	Do not deduct secured dathe amount of any secure Creditors Who Have Clair.  Current value of the	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ f your ownership simple, tenancy by
1.2. Street address, if available, or other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare	Do not deduct secured clathe amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ f your ownership simple, tenancy by

Debt	First Name M				
		· · · · · · · · · · · · · · · · · · ·			
,	1.3. Street address, if avail	able, or other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	the amount of any sec	d claims or exemptions. Pu ured claims on Schedule L Claims Secured by Property
			Condominium or cooperative  Manufactured or mobile home  Land	Current value of the entire property?	e Current value of t portion you own?
			Investment property	<b>3</b>	_ \$
	City	State ZIP Code		Describe the nature of your owners interest (such as fee simple, tenance)	
				the entireties, or a	life estate), if known.
			Who has an interest in the property? Check one Debtor 1 only	)	
	County		Debtor 2 only		
			Debtor 1 and Debtor 2 only	Chack if this is	community property
			At least one of the debtors and another	(see instructions)	community property
			Other information you wish to add about this in property identification number:	tem, such as local	
Add you	d the dollar value of the u have attached for Pan	portion you own for a t 1. Write that number	II of your entries from Part 1, including any entric	es for pages →	\$0.0
ALC: N					
you owi	own, lease, or have lead that someone else drivings, vans, trucks, tractors	gal or equitable interes es. If you lease a vehicle	et in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts motorcycles	not? Include any vehicle and Unexpired Leases.	es
you l owl Cars	n own, lease, or have lead that someone else drives, vans, trucks, tractors	gal or equitable interes es. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts	not? Include any vehicle and Unexpired Leases.	es
you owi Cars	n own, lease, or have lead that someone else drivings, vans, trucks, tractors	gal or equitable interes es. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts	and Unexpired Leases.	
you ow/ Cars	n own, lease, or have lead that someone else drivings, vans, trucks, tractors	gal or equitable interes es. If you lease a vehick s, sport utility vehicles,	motorcycles  Who has an interest in the property? Check one.	and Unexpired Leases.  Do not deduct secured circ	aims or exemptions. Put
you ow/ Cars	n own, lease, or have lead that someone else drivings, vans, trucks, tractors No Yes  Make: Model:	gal or equitable interes es. If you lease a vehicles, s, sport utility vehicles, Ford Explorer	e, also report it on Schedule G: Executory Contracts	and Unexpired Leases.	aims or exemptions. Put d claims on <i>Schedule D</i>
you ow/ Cars	n own, lease, or have lead that someone else drivens, vans, trucks, tractors No Yes  Make:  Model: Year:	gal or equitable interes es. If you lease a vehicle s, sport utility vehicles,  Ford Explorer 2000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured classes, the amount of any secure Creditors Who Have Clair.  Current value of the	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. <b>Current value of the</b>
you ow/ Cars	n own, lease, or have lead in that someone else drivings, vans, trucks, tractors  No Yes  Make:  Model: Year:  Approximate mileage:	gal or equitable interes es. If you lease a vehicles, s, sport utility vehicles, Ford Explorer	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	and Unexpired Leases.  Do not deduct secured classes the amount of any secure Creditors Who Have Clair.	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
you owi Cars	n own, lease, or have lead that someone else drivens, vans, trucks, tractors No Yes  Make:  Model: Year:	gal or equitable interes es. If you lease a vehicle s, sport utility vehicles,  Ford Explorer 2000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured classes, the amount of any secure Creditors Who Have Clair.  Current value of the	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the portion you own?
you i owi Cars II \ 3.1.	n own, lease, or have lead in that someone else drivings, vans, trucks, tractors  No Yes  Make:  Model: Year:  Approximate mileage:	gal or equitable interes es. If you lease a vehicle s, sport utility vehicles  Ford Explorer 2000 160,000  one, describe here:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair.  Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$ 800.00  ims or exemptions. Put I claims on Schedule D: is Secured by Property.
Cars  I I  I V  3.1.	n own, lease, or have lead that someone else drivens, vans, trucks, tractors No Yes  Make: Model: Year: Approximate mileage: Other information:  I own or have more than Make: Model: Year: Approximate mileage:	gal or equitable interes es. If you lease a vehicle s, sport utility vehicles,  Ford Explorer 2000 160,000  one, describe here:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured claim the amount of any secure Creditors Who Have Claim Current value of the entire property?  \$ 800.00  Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the	aims or exemptions. Put d claims on Schedule D. ins Secured by Property.  Current value of the portion you own?  \$ 800.00  ims or exemptions. Put claims on Schedule D: is Secured by Property.  Current value of the

		Page 13 of 64 number of		
3.3. Ma.	ıke:	Who has an interest in the property? Check one.	An under against accounces to	claims or exemptions. Put
Мо	odel:	Debtor 1 only	the amount of any secur	red claims on Schedule D. aims Secured by Property.
Yea	ar:	Debtor 2 only	the transfer of the second of	$(S_{ij}) + (S_{ij}) $
Apr	proximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of t portion you own?
	ner information:	At least one of the debtors and another	onmo property:	portion you own?
[		☐ Check if this is community property (see	¢	\$
		instructions)	Ψ	
3.4. Mak	ke:	Who has an interest in the property? Check one.	Do not deduct cooured o	laims or exemptions. Put
Mod	del:	Debtor 1 only	the amount of any secure	ed claims on Schedule D.
Yea	17.	Debtor 2 only	Creditors Who Have Clai	ims Secured by Property.
	***************************************	Debtor 1 and Debtor 2 only	Current value of the	
	roximate mileage:	At least one of the debtors and another	entire property?	portion you own?
Othe	er information:			
-		☐ Check if this is community property (see instructions)	\$	\$
atercraft	t, aircraft, motor homes, AT	Vs and other recreational vehicles, other vehicles, and acces	sories	
No Yes  Make Mode Year:	et:	Vs and other recreational vehicles, other vehicles, and accessonal watercraft, fishing vessels, snowmobiles, motorcycle accessonal watercraft, fishing vessels, snowmobiles, motorcycle accessonal watercraft, fishing vessels, snowmobiles, fishing vessels, sn	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
No Yes  Make Mode Year:	e:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.  Current value of the
No Yes  Make Mode Year:	e:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.  Current value of the
No Yes  Make Mode Year: Other	e:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.  Current value of the
No Yes  Make Mode Year: Other	e:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Clain  Current value of the entire property?	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
No Yes  Make Mode Year: Other	e: r information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Te: Who has an interest in the property? Check one.	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property?  \$  Do not deduct secured claim the amount of any secured	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
No Yes  Make  Mode  Year:  Other  Ou own or  Make:  Model	er have more than one, list he	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Te: Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secured Creditors Who Have Clain  Current value of the entire property?	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
No Yes  Make Mode Year:  Make: Model Year:	er information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtors and another  At least one of the debtors and another  Check if this is community property (see instructions)  Te:  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claims	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
No Yes  Make Mode Year:  Make: Model Year:	e: r information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Te: Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured claimed the amount of any secured Creditors Who Have Claimed Current value of the entire property?  Do not deduct secured claimed the amount of any secured Creditors Who Have Claimed Current value of the	d claims on Schedule Dans Secured by Property.  Current value of the portion you own?  \$

4.

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Part 3:

**Describe Your Personal and Household Items** 

Current value of the

	or equitable interest in any of the following items?	Current valu portion you Do not deduct s	own?
6	Household goods and furnishings	or exemptions.	
	Examples: Major appliances, furniture, linens, china, kitchenware		
	□ No		
	Yes. Describe Used Couch & Chair, Used Dining Set, Basic Dish Set, Glasses and Silverwar	re <sub>\$</sub>	300.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games  No		
	Yes. Describe 2 Televisions, 1 Dvd Player, 1 Stereo	\$	100.00
8,	Collectibles of value	1974 - 184 - 184	***************************************
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No		
	Yes. Describe	\$	0.00
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	Yes. Describe	·	0.00
40		\$	0.00
	Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No		
	Tes. Describe	\$	0.00
11,	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No		
	Yes. Describe Jeans, Shirts, Shorts and Tennis Shoes	\$	100.00
<u>[</u>	lewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☑ No ☑ Yes. Describe	· ·	0.00
13. N	on-farm animals	\$	0.00
E	examples: Dogs, cats, birds, horses		
	No Yes. Describe	1	
		\$	0.00
	ny other personal and household items you did not already list, including any health aids you did not list		
	No Sive specific		
_	Yes. Give specific information	\$	0.00
5. <b>A</b> fo	dd the dollar value of all of your entries from Part 3, including any entries for pages you have attached r Part 3. Write that number here	\$	500.00

Part 4: Describe Your Financial Asse	ts
--------------------------------------	----

Do you own or have an	ry legal or equitable interest in	any of the following?	<b>pc</b> Do	urrent value of the ortion you own? Into the deduct secured claim exemptions.
16. <b>Cash</b>				
	u have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your pe	tition	
No No				
Yes		Cash:	\$ <u>.</u>	0.00
and other	savings, or other financial acco similar institutions. If you have r	unts; certificates of deposit; shares in credit unions, brokerage nultiple accounts with the same institution, list each.	e houses,	
☐ No ☐ Yes		Institution name:		
	17.1. Checking account:	Chase Bank	Φ.	5.00
	17.2. Checking account:		-	0.00
	17.3. Savings account:		-	
	17.4. Savings account:			0.00
	17.5. Certificates of deposit:		Ψ	0.00
	17.6. Other financial account:		Ψ	0.00
	17.7. Other financial account:		·-	
			Ψ_	0.00
	17.8. Other financial account:		<b>-</b>	0.00
	17,9. Other financial account:			0.00
18. Bonds, mutual funds,  Examples: Bond funds,  12 No  13 Yes	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accounts		
	4		\$	
			\$	
			\$ <u>-</u>	
an LLC, partnership, a	tock and interests in incorpor and joint venture	ated and unincorporated businesses, including an intere	st in	
✓ No ✓ Yes. Give specific	Name of entity:	% of owners	hip:	
information about			% \$_	
them	44-4	U <sub>0</sub> /	% \$	W
	***************************************	U /8	% \$	****

Debtor 1 EValue 1	6-12046 Do	c 1 Filed 04/08/16  Last Name Document	Entered 04/08/16 13:58:45 Page 16 of 64 number (# known)	
20. Government and con	porate bonds and o	ther negotiable and non-neg	natiahla instrumente	
Negotiable instruments	s include personal ch	ecks, cashiers' checks, promis	esant notes, and money orders	
rvon-negotiable instrui	nents are those you o	cannot transfer to someone by	signing or delivering them.	
No No				
Yes. Give specific information about	Issuer name:			
them				\$
				<u> </u>
				\$ <u></u>
f. Retirement or pension	n accounts			
		401(k), 403(b), thrift savings a	ccounts, or other pension or profit-sharing pla	ans
☑ No				
Yes. List each account separately.	. Type of account:	Institution name:		
Doparatory				
	401(k) or similar plan			\$
	Pension plan:			\$
	IRA:			\$
	Retirement account:	***************************************		<b>\$</b>
	Keogh:			\$
	Additional account:			\$
	Additional account:			
				<b>.3</b>
2. Security deposits and Your share of all unused Examples: Agreements companies, or others  No Yes	d deposits you have r with landlords, prepa	id rent, public utilities (electric	e service or use from a company , gas, water), telecommunications	
	Electric:	stitution name or individual:		2.0
	Gas:			\$
	Heating oil:			\$ 0.00
	_	ntal unit: Michgan Tower A	partments	. <u>\$</u> 0.00
	Prepaid rent:		I	\$ <u>250.00</u>
	Telephone:			\$0.00
	Water:			\$0.00
	Rented furniture:			\$0.00
	Other:			\$ 0.00
				\$
Annuities (A contract for	a periodic payment o	of money to you, either for life	or for a number of years)	
☑ No			• ,	
☐ Yes	Issuer name and desc	cription:		
				\$
				- \$
				. \$

Debtor 1 Evalue 16-12046 Doc 1 Filed 04/0	18/16 Entered 04/08/16 13:58:45 Di non Page 17 of 64 number (# known)	esc main
	and the second of the second o	
24. Interests in an education IRA, in an account in a qualified ABL 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	_E program, or under a qualified state tuition program	1.
☑ No		
Yes	Connectely file the seconds of any interest of	
monation name and description. S	Separately file the records of any interests.11 U.S.C. § 52	1(c):
		\$
		. \$
		- \$ <u> </u>
5. Trusts, equitable or future interests in property (other than any	othina listed in Marc 43	
exercisable for your benefit	ytning listed in line 1), and rights or powers	
☑ No		
Yes. Give specific information about them	7	
		\$
8. Patents, copyrights, trademarks, trade secrets, and other intell		
Examples: Internet domain names, websites, proceeds from royaltic	les and licensing agreements	
☑ No	· ·	
Yes. Give specific information about them		3 A Allen and 4 a
		\$
Licenses, franchises, and other general intangibles		
Examples: Building permits, exclusive licenses, cooperative associated associ	ation holdings, liquor licenses, professional licenses	
☑ No	professional neerises	
Yes. Give specific		**************************************
information about them		\$
		· · · · · · · · · · · · · · · · · · ·
oney or property owed to you?		Current value of the
		portion you own? Do not deduct secured
Tax refunds owed to you		claims or exemptions.
No		
Yes. Give specific information		
about them, including whether	Federal:	\$
you already filed the returns and the tax years	State:	\$
	Local:	\$
Family support		
Examples: Past due or lump sum alimony, spousal support, child sup  Mo	эрол, maintenance, divorce settlement, property settleme	ent
Yes. Give specific information		
spanie mornauori	Alimony:	\$
	Maintenance:	\$ \$
	Support:	\$
	Divorce settlement:	\$
	Property settlement:	\$
Other amounts someone owes you		
Examples: Unpaid wages, disability insurance payments, disability be Social Security benefits; unpaid loans you made to some	enefits, sick pay, vacation pay, workers' compensation,	
2 No	one else	
☐ Yes. Give specific information		***************************************
		\$

Debtor 1 First Name	16-12046 Jean	CI FIIEO 04/08/16 Beamon Last Name Document	Entered 04/08/16 13:58:45 - Page 18 of 64 number (#known)	Desc Main
	ere ere er			
31. Interests in insura Examples: Health, o	i <b>nce policies</b> disability, or life insuran	ce, health savings account (F	ISA); credit, homeowner's, or renter's insurance	
☑ No	and the second	oo, nedial savings account (F	ioA); credit, homeowner's, or renter's insurance	
Yes. Name the i	insurance company			
of each pol	licy and list its value	Company name:	Beneficiary:	Surrender or refund value
				<u> </u>
32 Any interest in area	mousing the state of the			<u> </u>
or you are the benefic property because so	ciary of a living trust ex	from someone who has diec spect proceeds from a life inst	d urance policy, or are currently entitled to receive	
<b>☑</b> No	<b></b>			
Yes. Give specifi	ic information	A Adams A Adam		Section according to Applications of the
	Ĺ			\$
33. Claims against third Examples: Accidents	d parties, whether or a s, employment disputes	n <b>ot you have filed a lawsuit</b> , insurance claims, or rights to	or made a demand for payment	
No No				
Yes. Describe ea	ich claim	(Party ) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		***************************************
		and the content of the first of the content of the		\$
	d unliquidated claims	of every nature, including	counterclaims of the debtor and rights	
No No	province of the second	alad and American (1954) and a managery of the forms a managery of a factor of the managery of the analysis of the second of the		
Yes. Describe ead				
	Ĺ,.			\$
5. Any financial assets  No Yes. Give specific	garbano and			H Tette of An Andrews
Tes. Give specific				\$
6. Add the dollar value for Part 4. Write that	of all of your entries	rom Part 4. including any o	ntring for an annual to the state of the sta	
			attached	\$ 255.00
	And the second second			
	_			
prt5: Describe	Any Business-Re	lated Property You O	wn or Have an Interest in. List any	real estate in Part 1.
		interest in any business-rel		
No. Go to Part 6.		-		
☐ Yes. Go to line 38.				
				Current value of the portion you own?
				Do not deduct secured claims or exemptions.
Accounts receivable o	or commissions you a	Iready earned		or exempleons.
□ No				
Yes. Describe	, , , , , , , , , , , , , , , , , , ,			
Office				\$
Office equipment, furn Examples: Business-related	nishings, and supplies	dama printa		
No No	a computers, surtware, mo	derns, printers, copiers, fax mach	ines, rugs, telephones, desks, chairs, electronic device	es
Yes. Describe		and a street of the street of		
- res. Describe				•
L				Ψ

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		Last	civame	J		
40. <b>Machi</b> n	ery, fixtures,	equipment, supplies you	u use in business, and t	ools of your trade		
□ No						
<b>□</b> Yes	. Describe					
						<b>3</b>
41. Invento	rv					
☐ No		The second of the second secon		anne de la la la compania de compania de compania de la la compania de la la compania de la la compania de la compania del compania de la compania de la compania del compania de la compania del la compania del la compania de la compania de la compania de la compania de la compania del la compania d		
Yes.	. Describe	The state of the s				•
			and the state of t	nna marken turmanna i karta ita ilia ilia ilia ilia ilia ilia ili	minus (4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
42. Interests	s in partnersh	nips or joint ventures				
☐ No						
Yes.	Describe	Name of entity:			0/ . f	
					% of ownership:	
					%	\$
					% %	\$
						<b>3</b>
☐ No		ng lists, or other compila				
Yes.	Do your lists	include personally iden	tifiable information (as o	defined in 11 U.S.C. § 101(41A)	)?	
	□ No	Security (V recover recover) And the property of the property				
	Yes. Desc	ribe		терен шишин шири 74 идан шишину,47 он шишинин 54 (17он и шишинда 5		m , unit / 1 m
		No. 114. promine months of the contract of the				\$
44. Any busi	iness-related	property you did not alre				l
☐ No			•			
	Give specific					•
лион	nau011					\$
		***************************************			***************************************	\$
						\$
						\$
						\$
						\$
45. Add the d	dollar value o	f all of your entries from	Dort E including	ntries for pages you have attac		<u> </u>
for Part 5	. Write that n	umber here	rait 5, including any er	itries for pages you have attac	ched	\$0.00
NELSKI SKONOS				•		
Part 6:	Describe An	y Farm- and Commer	cial Fishing-Related	Property You Own or Have	an interest I	n
	f you own or	have an interest in farml	and, list it in Part 1.			•••
46 Do you ou	un or hous an					
No. Go	o to Part 7.	y legal or equitable intel	rest in any farm- or com	mercial fishing-related proper	ty?	
☐ Yes. G	o to line 47.					
						Current value of the portion you own?
47. Farm anin	nale					Do not deduct secured claims or exemptions.
		ultry, farm-raised fish				,
□ No	-irosioon, poi	awy, rann-raised IISN				
Yes				н мануу урады уулын и имарды шаши и мануу арады и манимин маруу разан ий мануу арады		
				· · · · · · · · · · · · · · · · · · ·		
	No. o are a series	hanness on the state of the sta				\$

Debtor 1 EValse 16-12046 Joc 1 Filed L First Name Middle Name Last Name DOC	ment Page 20 of 64 number (if kin	D(0.43 D)	
48. Crops—either growing or harvested			
☐ No☐ Yes. Give specific			······································
information			\$
49. Farm and fishing equipment, implements, machinery, fixi ☐ No	ures, and tools of trade		
			\$
50. Farm and fishing supplies, chemicals, and feed		. 114 115 115 170, \$10, 115 115 115 115 115 115 115 115 115 11	, i
☐ No ☐ Yes			
			\$
51. Any farm- and commercial fishing-related property you di	d not already list		<u> </u>
U No			
information.			\$
52. Add the dollar value of all of your entries from Part 6, incl	uding any entries for pages you have atten-	hed	\$ 0.00
for Part 6. Write that number here			\$
Yes. Give specific information	that number here	<b>&gt;</b>	\$ \$ \$
art 8: List the Totals of Each Part of this For	m		
5. Part 1: Total real estate, line 2		····	\$ 0.00
. Part 2: Total vehicles, line 5	\$800.00		
Part 3: Total personal and household items, line 15	\$ 500.00		
Part 4: Total financial assets, line 36	\$ 255.00		
Part 5: Total business-related property, line 45	\$ 0.00		
Part 6: Total farm- and fishing-related property, line 52	\$ 0.00		
Part 7: Total other property not listed, line 54	- 0.00		
	- Y		
.Total personal property. Add lines 56 through 61	\$Copy personal pr	operty total 👈	<b>+</b> §1,555.00
Total of all property on Schedule A/B. Add line 55 + line 62		······································	\$1,555.00

Case 16-12046 Doc 1 Filed 04/08/16 Entered 04/08/16 13:58:45 Desc Main Page 21 of 64 Document Fill in this information to identify your case: Eva Jean Debtor 1 Beamon First Nam Middle Name Last Name Willie Debtor 2 Beamon Jr. (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois • Case number Check if this is an (If known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. **Identify the Property You Claim as Exempt** 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief 625 ILCS 45/3A7 CAR \$800.00 **Ø** \$ 800.00 description: Line from 100% of fair market value, up to 3.1 Schedule A/B: any applicable statutory limit Brief 625 ILCS 45/3A7 \$300.00 Hosuehold Goods **2** \$ 300.00 description: Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit Brief Electronics 625 ILCS 45/3A7 \$100.00 **☑** \$ 100.00 description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Νo Yes

Part 2:

 Case 16-12046
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 Eva
 Jean
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 Page 22 of 64 plane
 Case number (# known)
 Case number (# known)

Debtor 1

**Additional Page** 

Brief descript on Schedule	tion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Clothes	\$100.00	<b>2</b> \$ 100.00	625 ILCS 45/3A7
Line from Schedule A/B:	11		100% of fair market value, up to any applicable statutory limit	
Brief description:	-	\$	<b>\$</b>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b></b> \$	
Line from Schedule A/B:	No.		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from		\$	\$ \$ 100% of fair market value, up to	
Schedule A/B:	4400.		any applicable statutory limit	
Brief description: Line from		\$	\$ \$ 100% of fair market value, up to	
Schedule A/B:	****		any applicable statutory limit	
Brief description:		\$	<b>_</b> \$	
Line from Schedule A/B;	· Mode		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b></b>	
Line from Schedule A/B;	4.16.		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	7.00	\$	<b>U</b> \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>□</b> \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$	<b>□</b> \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$	<b>-</b> \$	
Line from Schedule A/B:   -			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>□</b> \$	
Line from Schedule A/B:	The Ballander comme		100% of fair market value, up to any applicable statutory limit	

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Fill in this in	formation to ide	entify your case:	Jeument	raye 2
	iioiiiialloii to la	andly your case.		
Debtor 1	Eva	Jean	Beamon	
	First Name	Middle Name	Last Name	
Debtor 2	Willie		Beamon .	lr.
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court fo	r the: Northern District of Illino	ois	
Case number (if known)				

Check if this is an amended filing

#### Official Form 106D

# Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below.

As much as possible, list the claims in a	s more than one secured claim, list the creditor separately r has a particular claim, list the other creditors in Part 2. Iphabetical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Describe the property that secures the claim:	_		
Creditor's Name	and property that secures the claim:	\$	\$	\$
Number Street				
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated			
, out 24 odge	☐ Disputed			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another  Check if this claim relates to a	Judgment lien from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt				
community debt  Date debt was incurred				
community debt	Last 4 digits of account number	2007 Bahiran Sandaran Sandar	THE A SECURITY AND ASSESSMENT OF THE ASSESSMENT	i de egit kun menende inde egit kun
community debt  Date debt was incurred	Last 4 digits of account number	3000 salas a la seria de la compansión d	\$\$	
community debt  Date debt was incurred .2	Last 4 digits of account number	2007 Bahiran Sandaran Sandar	\$\$	
community debt Date debt was incurred .2	Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	2007 Bahiran Sandaran Sandar	\$\$	
community debt  Date debt was incurred  .2  Creditor's Name  Number Street  City State ZIP Code	Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	2007 Bahiran Sandaran Sandar	\$\$	
Community debt  Date debt was incurred  .2  Creditor's Name  Number Street  City State ZIP Code  Who owes the debt? Check one.	Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.	2007 Bahiran Sandaran Sandar	\$\$	
Community debt Date debt was incurred  .2  Creditor's Name  Number Street  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)	2007 Bahiran Sandaran Sandar	\$\$	
Community debt  Date debt was incurred  2  Creditor's Name  Number Street  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)	2007 Bahiran Sandaran Sandar	\$\$	
Community debt Date debt was incurred  .2  Creditor's Name  Number Street  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)	2007 Bahiran Sandaran Sandar	\$\$	

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Debtor 1

Jean

Document<sub>n</sub>

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Middle Name

Last Name

Part 1: After listing any entries on this by 2.4, and so forth.	s page, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	_			
	As of the date you file, the claim is: Check all that apply.  ☐ Contingent	1		
City State ZIP Code	Unfiquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	artiintiiridadiiriirarii retariirari setiiritatariidiidiiniyaa oowaan iaraan oonaatii		ally photological property between the control of the state of the expension of the control of t
Creditor's Name	The property that secures the claim.	3	\$\$	
Number Street				
Humber Sucet	As a fall and a fall a			
	As of the date you file, the claim is: Check all that apply.  —   — Contingent			
	Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	· · · · · · · · · · · · · · · · · · ·			
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
The second secon	The control of the co	a de till komit med koming om græg en	re desirably dell'address ( a commence of the content of the Conte	Titalian and the second and the seco
Creditor's Name	Describe the property that secures the claim:		\$\$	
Number Street				
	As of the date were file the about 100 and 100			
	As of the date you file, the claim is: Check all that apply.  Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			:
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			:
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries	in Column A on this page. Write that number here:			Y
	add the dollar value totals from all pages.			

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Desc Main

Debtor 1

Jean

Document Beamon

Case number (if known)\_

	AND THE D	
Part 2:	List Others to Be Notified for a Debt That You Already Listed	

e notified f	or any debts in Part 1,	do not fill out or sub	nit this page.	trie creditor in Part 1, and then list the collection agency here. Similarly, , list the additional creditors here. If you do not have additional persons
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street	P		
City		State	ZIP Code	
	i Prison (1909) (1904)	er til er kartillar for framskappen framstat ståle sed men en e	n televised (1.1. New Med. i televise et en repetit et en latige de plane et en petit de la en later et en late	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
many-personal accordance and apply	t engage på till till till til skip er en med et skilltion kall ander klanter til skill till til skip en men men	militar kantalahan gamigi digi militar 1999 dianahan kanaman meneri sistempada pidametan danahan jamijan.	de Paramet II de medicen en exemple i 1900 de medicen de medicen de demonstra de petitos de este comencia e em	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	<del>-</del>
(1996) ar 19, for extra for 1907 to the time of the artificine ground year	માં આવેલા કર્યા કરેલા કર્યા કરતા છે. કે ઉપાણક કરેલા અંતર્કાર્ક માટે માટે માટે માટે માટે કરવા કરવા કરતા હતા. જે ત્યાં કર્યા કર્યા કર્યા કરતા કરતા કરતા કરતા કરતા કરતા કરતા કરત	ein kommissionen kun june justi van itusko avoitailon apomalisty heisykeit joi enersiäväyne, an komm	والمراب والمسترف والمعاولة والمعاولة والمنافقة المسترفة والمتاوية والمتاوية والمتاوية والمتاوية والمتاوية والم	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			_
				-
City	and, અને પ્રત્યા કર્યા છે. તે કરો પ્રત્યા કરવા કરવા કરવા માટેલિયા કરી કરે છે. તે પ્રત્યા કે અને ક્ષેત્ર કરે કરી કરી કરો છે. તે કરો કરો કરી	State  State	ZIP Code	
Name				On which line in Part 1 did you enter the creditor?
Number	Street			Last 4 digits of account number
City		State	ZIP Code	
Na			. The second sec	On which line in Part 1 did you enter the creditor?
Name		•		Last 4 digits of account number
Number	Street			
City		State	ZIP Code	

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	CSS ACKERSON CONTRACTOR IN A ST	AND DESCRIPTION OF THE PARTY OF	JUCUITICITE	raye 2
Fill in this in	formation to ide	entify your case:		
Debtor 1	Eva	Jean	Beamon	
	First Name	Middle Name	Last Name	
Debtor 2	Willie		Beamon Jr.	
(Spouse, if filing)	First Name	Middle Name	Last Name	
Jnited States B	ankruptcy Court for	r the: Northern District of	f Illinois	
Case number				_

Check if this is an amended filing

### Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

art 1: List All of Your PRIORITY Unsecu	'ed Claims	
Do any creditors have priority unsecured claim	s against you?	
№ No. Go to Part 2.		
Yes.		
nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list to a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's no Part 1. If more than one creditor holds a particular claim	hat claim here and show both priority and
(For an explanation of each type of claim, see the	nstructions for this form in the instruction booklet )	, not the other creditors in Fait 3,
7	,	Total claim Priority Nonpriority amount amount
Priority Creditor's Name	Last 4 digits of account number	\$\$\$
		*
Number Street	When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply	
City Slote 700 C-1-	Contingent	
, State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	— Dispated	
Debtor 2 only	Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Domestic support obligations	
At least one of the debtors and another	Taxes and certain other debts you owe the government	
Check if this claim is for a community debt	Claims for death or personal injury while you were	
Is the claim subject to offset?	intoxicated por solidar injury write you were	
□ No	Other. Specify	
Q Yes		
Priority Creditor's Name	Last 4 digits of account number	in the content of t
Priority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$\$\$
Number Street	Then has the dept incurred?	
	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent	
City State ZIP Code	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	T (BB::-:::::::::::::::::::::::::::::::::	
Debtor 2 only	Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Domestic support obligations	
At least one of the debtors and another	Taxes and certain other debts you owe the government	
	Claims for death or personal injunctibility	
☐ Check if this claim is for a community debt Is the claim subject to offset?	Claims for death or personal injury while you were intoxicated	

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Debtor 1

Jean

Dogument

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Desc Main

Case number til kno

Part 1: Your PRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. **Total claim Priority** Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent City State 7IP Code ☐ Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Other, Specify Is the claim subject to offset? □ No Q Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated Other, Specify Is the claim subject to offset? O No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent State ZIP Code Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated Other, Specify Is the claim subject to offset? ☐ No Yes

Case 16-12046 Doc 1 Filed 04/08/16 Entered 04/08/16 13:58:45 Desc Main Document Page 28 of 64 Debtor 1 Jean Case number (# kn Part 2: **List All of Your NONPRIORITY Unsecured Claims** 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim CITI/CBNA Last 4 digits of account number 5 1 3 0 Nonpriority Creditor's Name 1,979.00 P O BOX 6497 11/20/2004 When was the debt incurred? Street SIOUX FALLS SD 57117 State As of the date you file, the claim is: Check all that apply. ZIP Code ☑ Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts No No Other. Specify CREDIT CARD ☐ Yes COMENITY CAPITAL/HSN Last 4 digits of account number 8 5 0 338.91 Nonpriority Creditor's Name When was the debt incurred? 01/20/20 6 P O BOX 182120 Number **COLUMBUS** As of the date you file, the claim is: Check all that apply. OH 43218 City State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ✓ No Other. Specify CREDIT CARD Yes COMENITY BANK/BRYLNHME Last 4 digits of account number 8 5 8 3 Nonpriority Creditor's Name 299.12 When was the debt incurred? 11/20/20#5 P O BOX 182789 Number Street **COLUMBUS** OH 43218 As of the date you file, the claim is: Check all that apply. State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce Is the claim subject to offset? that you did not report as priority claims No Ye Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other, Specify CREDIT CARD

Debtor 1

Jean

Middle Name

Last Name

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

٦	nowny any entries on this page	, number th	em beginning wi	th 4.4, followed by 4.5, and so forth.	Total c
	COMENITY BANK/CARSO	N		Last 4 digits of account number 1 0 8 5	s 53
P	O BOX 182789			When was the debt incurred? 11/20/20 5	Ψ
С	umber Street COLUMBUS	ОН	43218	As of the date you file, the claim is: Check all that apply.	
	/no incurred the debt? Check one. Debtor 1 only Debtor 2 only	State	ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and anot			Student loans Obligations arising out of a separation agreement or divorce that	
ls i	Check if this claim is for a comethe claim subject to offset?  No Yes	munity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CREDIT CARD	
C(	OOK COUNTY HEALTH &	& HOSPIT	ALS	Last 4 digits of account number 8 7 8 5	\$ <u>232</u>
P	O BOX 70121			When was the debt incurred? 10/20/20 ₹ 4	
Ch	mber Street HICAGO	IL	60673	As of the date you file, the claim is: Check all that apply.	
City	1	State	ZIP Code	Contingent	
	no incurred the debt? Check one. Debtor 1 only			Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and anoth			<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
		unity debt		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify MEDICAL	
CO	OOK COUNTY HEALTH &	HOSPITA	LS	Last 4 digits of account number 7 1 2 8	s <u>484</u>
	priority Creditor's Name  O BOX 70121  aber Street			When was the debt incurred? 11/20/20 2	
	HICAGO	IL State	60673 ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent	
Who	o incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only			·	
	Debtor 1 and Debtor 2 only  At least one of the debtors and anothe			Type of <b>NONPRIORITY</b> unsecured claim:  Student loans	
	At least one of the debtors and anothe Check if this claim is for a commi			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
is th	ne claim subject to offset?	unity debt		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify MEDICAL	

Debtor 1

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Case number (if known)

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### Your NONPRIORITY Unsecured Claims - Continuation Page

	• • • • • • • • • • • • • • • • • • • •		h 4.4, followed by 4.5, and so forth.	Total	
CREDIT ONE BANK			Last 4 digits of account number 5 2 3 8	s 1,00	
Nonpriority Creditor's Name P O BOX 98873			When was the debt incurred? 09/20/20●5		
Number Street LAS VEGAS	NV	89193	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	☑ Contingent		
Who incurred the debt? Check or	ne.		Unliquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
<ul><li>At least one of the debtors and at</li><li>Check if this claim is for a co</li></ul>			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Is the claim subject to offset?	ucut		Debts to pension or profit-sharing plans, and other similar debts		
☑ No			☑ Other, Specify CREDIT CARD		
Yes					
CREDIT FIRST NA/FIRES	STONE	inelied version versionississis kapen lända killendistassessissississississississississississis	Last 4 digits of account number 3 4 3 4	\$_2,5	
Nonpriority Creditor's Name POBOX 81344			When was the debt incurred? 05/20/20 <b>0</b> 5		
Number Street			Assists was the debt lifediled.		
CLEVELAND	ОН	44188	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one	e.		☐ Unliquidated ☐ Disputed		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only  At least one of the debtors and and	other		☐ Student loans		
			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
Check if this claim is for a con	nmunity debt		Debts to pension or profit-sharing plans, and other similar debts		
is the claim subject to offset?  Mark No			☑ Other Specify CREDIT CARD		
Maria No □ Yes					
FIRST PREMIER BANK	thin the fact of thin the company are produced as the contract of the contract	international and activities of the contraction of	Last 4 digits of account number 3 2 0 3	\$ <u>53</u>	
Nonpriority Creditor's Name			When was the debt incurred? 07/20/2009		
3820 N LOUISE AVE					
SIOUX FALLS	SD	57107	As of the date you file, the claim is: Check all that apply.		
ity	State	ZIP Code	Contingent		
Vho incurred the debt? Check one			Unliquidated Disputed		
Debtor 1 only			- Disputeu		
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only  At least one of the debtors and ano	ther		Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Check if this claim is for a com	munity debt		Debts to pension or profit-sharing plans, and other similar debts		
the claim subject to offset?			Other, Specify_CREDIT CARD		

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

and any strates on the	, bade' uquibei file	m negmning Wi	ith 4.4, followed by 4.5, and so forth.	Total o
KOHLS/CAPITAL ON			Last 4 digits of account number 9 4 5 9	s 4
P O BOX 3115			When was the debt incurred? 05/20/20 ₱5	V
Number Street MILWAUKEE	WI	53201	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Che Debtor 1 only Debtor 2 only	State ck one.	ZIP Code	Contingent Unliquidated Disputed	
Debtor 1 and Debtor 2 only At least one of the debtors a	nd another		Type of <b>NONPRIORITY</b> unsecured claim:  Student loans	
Check if this claim is for list the claim subject to offset	a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
No Yes			☑ Other, Specify CREDIT CARD	
MACYS Nonpriority Creditor's Name			Last 4 digits of account number 1 6 9 3	s <u>1,35</u>
P O BOX 8218			When was the debt incurred? 05/20/20 5	
Number Street MASON	ОН	45040	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Chec Debtor 1 only	k one.		☐ Unliquidated ☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors an			<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
Check if this claim is for a			you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? <b>7</b> No <b>1</b> Yes	,		Other. Specify CREDIT CARD	
MENARDS/CAPITAL O	notes and the content of the second s	till om film fan skalender it stelle fan de fynd om en ferfallen an de fan de fynd om en ferfallen an de fan d	Last 4 digits of account number 0 1 4 6	\$1,106
Popriority Creditor's Name O BOX 71106			When was the debt incurred? 11/20/20 €5	
umber Street CHARLOTTE ty	NC	28272	As of the date you file, the claim is: Check all that apply.	
y,	State	ZIP Code	☑ Contingent ☐ Unliquidated	
ho incurred the debt? Check	one.		☐ Disputed	
Debtor 1 only Debtor 2 only			·	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another		Student loans	
Check if this claim is for a	community debt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	
the claim subject to offset? No Yes			✓ Other. Specify CREDIT CARD	

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Debtor 1

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#### Your NONPRIORITY Unsecured Claims — Continuation Page

r listing any entries on this	page, number ti	1em beginning w	ith 4.4, followed by 4.5, and so forth.	Total claim		
TARGET CARD SERV	'ICES		Last 4 digits of account number 7 7 3 5	s 894.0		
Nonpriority Creditor's Name P O BOX 660170			When was the debt incurred? 05/20/20 <b>0</b> 5	Ψ		
Number Street  DALLAS	TX	***************************************	As of the date you file, the claim is: Check all that apply.			
City	State	ZIP Code	☑ Contingent			
Who incurred the debt? Chec	ck one.		☐ Unliquidated☐ Disputed			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
<ul> <li>Debtor 1 and Debtor 2 only</li> <li>At least one of the debtors ar</li> </ul>	nd another		Student loans			
☐ Check if this claim is for a			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>			
Is the claim subject to offset			Debts to pension or profit-sharing plans, and other similar debts			
M No	•		☑ Other, Specify CREDIT CARD			
☐ Yes						
WALMART/SYNCHRO	NY BANK	nd week with the contract of t	Last 4 digits of account number 8 5 0 1	* <u></u> 3	3,991.0	
Nonpriority Creditor's Name POBOX 530927			When was the debt incurred? 05/20/2005			
Number Street	GA	30353	As of the date you file, the claim is: Check all that apply.			
Dity	State	ZIP Code	Contingent			
Who incurred the debt? Check	cone.		Unliquidated			
Debtor 1 only			Disputed			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only  At least one of the debtors and			Student loans			
			Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a	=		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts			
s the claim subject to offset?			Other, Specify CREDIT CARD			
☑ No ☑ Yes						
'ERIZON WIRELESS	artisanskrigsårtisktys årdiskriske skressorenskrigsgriften et jokenskrigskriske et jokenskri	era der lände (and füngliche Generalismann Antonian Allande und Sanda and Antonian Andreas	Last 4 digits of account number	\$	714.00	
onpriority Creditor's Name			THE PARTY NAMED ASSESSMENT OF THE PA			
O BOX 4846			When was the debt incurred? 04/20/20¶4			
RENTON	NJ	08565	As of the date you file, the claim is: Check all that apply.			
ty	State	ZIP Code	☑ Contingent			
ho incurred the debt? Check	one.		Unliquidated			
Debtor 1 only			☐ Disputed			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only  At least one of the debtors and			☐ Student loans			
			Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a	community debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts			
the claim subject to offset?			Other. Specify CELL PHONE			

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Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

	page, number th	em beginning wi	th 4.4, followed by 4.5, and so forth.	Total claim
5.7 CAROL WRIGHT GIFT	S		Last 4 digits of account number 4 1 0 7	s 245,00
Nonpriority Creditor's Name P O BOX 7823			When was the debt incurred? 02/20/2016	\$
Number Street EDISON City	NJ State	08818	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	cone.	ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans	
☐ At least one of the debtors and☐ ☐ Check if this claim is for a Is the claim subject to offset? ☑ No ☐ Yes	community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CREDIT CARD	
.8 CITGO CONSUMER CA	ARD		Last 4 digits of account number 9 3 3 0	\$ <u>1,620.00</u>
P O BOX 6401  Number Street			When was the debt incurred? 02/20/2015	
SIOUX FALLS City	SD State	57117 ZIP Code	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	one.		<ul> <li>✓ Contingent</li> <li>Unliquidated</li> <li>Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>	
☐ Check if this claim is for a distribution is the claim subject to offset?  ☑ No ☐ Yes	community debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CREDIT CARD	
	indiad Zude Siryky dromowed a reservative (1495 Sie Stand Zeinstein Sie seichen Sie sessen	t de transition de la company de région y de la company		<sub>\$</sub> 1,465.00
HSN/COMENITY Nonpriority Creditor's Name P O BOX 659707			Last 4 digits of account number 6 0 3 5  When was the debt incurred? 07/20/2015	*
Number Street SAN ANTONIO	TX	78265	As of the date you file, the claim is: Check all that apply.	
City  Who incurred the debt? Check of Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and a			Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a cls the claim subject to offset?  ☑ No ☐ Yes	ommunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CREDIT CARD	

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Debtor 1

First Name

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### Your NONPRIORITY Unsecured Claims — Continuation Page

risung any entries on this page, no	ımber th	em beginning wit	th 4.4, followed by 4.5, and so forth.	Tı	otal claim	
JTV			Last 4 digits of account number 3 6 6 8	s 400.		
Nonpriority Creditor's Name P O BOX 105658		,	When was the debt incurred? 06/08/2015	Φ		
Number Street ATLANTA	GA	30348	As of the date you file, the claim is: Check all that apply.			
City	State	ZIP Code	☑ Contingent			
Who incurred the debt? Check one.			☐ Unliquidated			
Debtor 1 only			Disputed			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
<ul><li>Debtor 1 and Debtor 2 only</li><li>At least one of the debtors and another</li></ul>			☐ Student loans			
			Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a commu	nity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts			
s the claim subject to offset? ☑ No			Other. Specify CREDIT CARD			
⊒ Yes						
REHABILATION INSTITUTE C	F CHI	CAGO	Last 4 digits of account number 2 4 8 9	\$	666,0	
Ionpriority Creditor's Name			When was the debt incurred? 09/14/2010			
fumber Street CHICAGO	11	60670	As of the date you file, the claim is: Check all that apply.			
ity	State	60678 ZIP Code	Contingent			
Who in a compaddly a daylot of a			Unliquidated			
Who incurred the debt? Check one.  Debtor 1 only			☐ Disputed			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only			Student loans			
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a commun	ity debt		you did not report as priority claims			
the claim subject to offset?			<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other, Specify MEDICAL</li> </ul>			
¶No Pyes						
HOP HQ/EVINE LIVE	Partin Parti	A tendiden een ar maat en semant ja kalpitein planteen een moon maat en aansaan ja keel semanteen ja keel ja t	Last 4 digits of account number 1 5 8 9	\$	233.00	
onpriority Creditor's Name			When was the debt incurred? 08/23/2015			
O BOX 960009			THE SAME AND ADDRESS OF THE SAME ADDRESS OF THE SAME AND ADDRESS OF THE SAME AND ADDRESS OF THE SAME AND ADDRESS OF THE SAME A			
	FL State	32896	As of the date you file, the claim is: Check all that apply.			
	Jaio	ZIP Code	<ul> <li>✓ Contingent</li> <li>☐ Unliquidated</li> </ul>			
ho incurred the debt? Check one.			Disputed			
Debtor 1 only Debtor 2 only						
Debtor 2 only  Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
At least one of the debtors and another			Student loans Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a communi	ty debt		you did not report as priority claims			
the claim subject to offset?	-,		Debts to pension or profit-sharing plans, and other similar debts			
No			☑ Other. Specify CREDIT CARD			

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First Name Middle Name

Part 2: Your NONPRIO
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RITY Unsecured Claims - Continuation Page

	on this page, number ther	m beginning with 4	.4, followed by 4.5, and so forth.	Total claim
DIRECT TV			Last 4 digits of account number	s 166.00
Nonpriority Creditor's Name P O BOX 10565			When was the debt incurred? 10/31/201	<del></del>
Number Street ATLANTA City	GA State	30348 ZIP Code	As of the date you file, the claim is: Check all the	nat apply.
Who incurred the de		zir code	<ul><li>☑ Contingent</li><li>☑ Unliquidated</li><li>☑ Disputed</li></ul>	
Debtor 2 only Debtor 1 and Debto	or 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the o	debtors and another		<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreemer you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and oth</li> <li>Other. Specify CABLE SERVICE</li> </ul>	
Yes				
Strat for	d Career I	- nstrtucke	Last 4 digits of account number 188	2 s 579.00
Nonpriority Creditor's Name	Slain Common	s Unit 3	When was the debt incurred? 05 01 2	OIO
St. All bas	ns UT	05478	As of the date you file, the claim is: Check all th	at apply.
Who incurred the del	State ont? Check one.	ZIP Code	Contingent Unliquidated Disputed	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor	2 ook		Type of NONPRIORITY unsecured claim:	
At least one of the de	ebtors and another		<ul><li>Student loans</li><li>Obligations arising out of a separation agreemen</li></ul>	t or divorce that
	is for a community debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other	er similar debts
Is the claim subject to ☐ No ☐ Yes	o onset?		Other. Specify	
general meneral menera	ett ettentisk det prelijktig på griftiger, umper per per til med prelijktig de stjellige ette och på forder til stollige til per	finit (verkilit, response mer all til at til Millerdick) det til er sterre til ste stillet til sterre til ste	Last 4 digits of account number	
Nonpriority Creditor's Name	***************************************	A CONTRACTOR OF THE PARTY OF TH	When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that	at apply.
City  Who incurred the deb	State  1? Check one.	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor:  At least one of the de			☐ Student loans	
			<ul> <li>Obligations arising out of a separation agreement you did not report as priority claims</li> </ul>	or divorce that
Is the claim subject to No Yes	is for a community debt offset?		Debts to pension or profit-sharing plans, and other  Other. Specify	r sìmilar debts

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

AFFILATED CREDIT SE	RVICES		On which entry in Part 1 or Part 2 did you list the original creditor?			
PO BOX 7739			Line 6.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims			
Number Street	.,.,		Part 2: Creditors with Nonpriority Unsecured Claim			
ROCHESTER	MN	55903	Last 4 digits of account number 9 8 6 2			
City  - water transfer or tran	State	ZIP Code				
ALLIANCE ONE		-	On which entry in Part 1 or Part 2 did you list the original creditor?			
4850 STREET RD STE 3	00		Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims			
TREVOSE City	PA State	19053 ZIP Code	Last 4 digits of account number 8 7 5 4			
ALLIED INTERSTATE			On which entry in Part 1 or Part 2 did you list the original creditor?			
7525 W CAMPUS RD			Line 5.5 of (Check one):  Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims			
NEW ALBANY	OH State	43054 ZIP Code	Last 4 digits of account number 8 0 8 7			
AMERICAN CORADIUS	**************************************	tionis es missi variante esta esta esta esta esta esta esta es	On which entry in Part 1 or Part 2 did you list the original creditor?			
2420 SWEET HOME RD Number Street	STE 150		Line 6.0 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured  Claims			
AMHERST	NY State	14228 ZIP Code	Last 4 digits of account number 1 9 5 9			
CREDIT CONTROL LLC			On which entry in Part 1 or Part 2 did you list the original creditor?			
P O BOX 31179			Line 5.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims			
lumber Street			Part 2: Creditors with Nonpriority Unsecured Claims			
TAMPA Dity	FL State	33631 ZIP Code	Last 4 digits of account number 4 3 7 9			
NCO FINANCIAL SYSTE		risolamenta essa alla mangala mangala persona and	On which entry in Part 1 or Part 2 did you list the original creditor?			
507 PRUDENTIAL RD			Line 6.4 of (Check one):  Part 1: Creditors with Priority Unsecured Claims			
Jumber Street			Part 2: Creditors with Nonpriority Unsecured Claims			
HORSHAM City	PA State	19044 ZIP Code	Last 4 digits of account number 3 7 2 5			
FIRST NATIONAL COLLE	CTION E	BUREAU	On which entry in Part 1 or Part 2 did you list the original creditor?			
S10 WALTHAM WAY			Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
umber Street			Part 2: Creditors with Nonpriority Unsecured			
SPARKS	NV	80/12/	Claims			
ly	State	89434 ZIP Code	Last 4 digits of account number 6 0 6 5			

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Debtor 1

Jean Middle Name Beam Document

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## Part 3:

## List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
FOROTER A GARRIAGA A

FORSTER & GARBUS	LLP		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 60 MOTOR PARKWAY			Line 5.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
COMMACK City	NY State	11725 ZIP Code	Last 4 digits of account number 7 6 5 6
J.C. CHRISTENSEN & A	ASSOC. II	VC.	On which entry in Part 1 or Part 2 did you list the original creditor?
P O BOX 519 Number Street			Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured  Claims
SAUK RAPIDS City	MN State	56379 ZIP Code	Last 4 digits of account number 7 9 5 3
LVNV FUNDING LLC			On which entry in Part 1 or Part 2 did you list the original creditor?
P O BOX 10497 Number Street			Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured  Claims
GREENVILLE City	SC State	29603 ZIP Code	Last 4 digits of account number 5 2 3 8
MIDLAND FUNDING			On which entry in Part 1 or Part 2 did you list the original creditor?
8875 AERO DR STE 200 Number Street	)		Line 5.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured  Claims
SAN DIEGO	CA State	92123 ZIP Code	Last 4 digits of account number 4 8 2 5
PORTFOLIO RECOVER	Y ASSOC		On which entry in Part 1 or Part 2 did you list the original creditor?
120 CORPORATE BLVD	STE 100		Line 6.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
NORFOLK	1/4	22502	Claims
City	VA State	23502 ZIP Code	Last 4 digits of account number 0 6 2 5
PINNACLE CREDIT SER	RVICES LI	_C	On which entry in Part 1 or Part 2 did you list the original creditor?
P O BOX 640 Number Street			Line 5.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
HOPKINS City	MN State	55349 ZIP Code	Last 4 digits of account number <u>* O T 5</u>
NORTHLAND GROUP IN	Nahi Tahun Tahun Sandan Sa		On which entry in Part 1 or Part 2 did you list the original creditor?
P O BOX 390846 Number Street			Line 5.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured  Claims
MINNEAPOLIS City	MN State	55439 ZIP Code	Last 4 digits of account number 9 8 3 1

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

NORTHLAND GROU	P INC		On which entry in Part 1 or Part 2 did you list the original creditor?
P O BOX 390905			
Number Street			Line 5.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
01000			Part 2: Creditors with Nonpriority Unsecured Claims
MINNEAPOLIS	MN	55439	Last 4 digits of account number 8 0 2 2
errommon en	State	ZIP Code	Michine paragio post anticolomic superiori (Colombia de Calendario) (Co
OLIPHANT FINANCIA	AL		On which entry in Part 1 or Part 2 did you list the original creditor?
2601 CATTLEMEN R	D STE 300		Line 6.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			
			☑ Part 2: Creditors with Nonpriority Unsecured Claims
SARASOTA	FL	34232	4 ** 0 0
City	State	ZIP Code	Last 4 digits of account number 4 7 0 0
UNITED COLLECTIO	NS BUREAU	дінік 1 білінерін жалаға оны жалағында қарақ жалағы жәнерінің	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
5620 SOUTHWYCK E	BLVD STE 20	)6	Line $\underline{5.2}$ of (Check one): $\square$ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
TOLEDO Dity	OH State	43614	Last 4 digits of account number 8 6 7 1
er geggen en er er het fangen van zom er er en er er er het het de er er en er e	HET CHITTISH THE STATE OF THE PROPERTY AND THE STATE OF T	ZIP Code	
WELTMAN WEINBER	G &REIS		On which entry in Part 1 or Part 2 did you list the original creditor?
P O BOX 93784			Line 4.7 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
CLEVELAND	ОН	44101	2 0 0 4
City	State	ZIP Code	Last 4 digits of account number 2 9 2 4
JSCB CORPORATIO	V		On which ontry in Part 1 or Part 3 did you had be actually and the actual of the actua
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
101 HARRISON ST			Line 6.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
ARCHBALD	PA State	18403 ZIP Code	Last 4 digits of account number 1 8 8 2
lame			On which entry in Part 1 or Part 2 did you list the original creditor?
anie			Line of (Checkens) [7] Bodd O. B. W. B. W. B.
lumber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
		······································	Part 2: Creditors with Nonpriority Unsecured Claims
	State	ZIP Code	Last 4 digits of account number
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
			line of (Chapk ana): T Part 1: Condition with Date 1:
umber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
tv			Last 4 digits of account number

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Debtor 1

Jean Middle Name Beam Document

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6а	. Domestic support obligations	6a.	\$	0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims	6f.	Student loans	6f.	\$	579.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	21,292.34
	6j. 1	<b>fotal.</b> Add lines 6f through 6i,	6j.	\$	21,871.34

Case 16-12046 Doc 1 Filed 04/08/16 Entered 04/08/16 13:58:45 Desc Main Document Page 40 of 64 Fill in this information to identify your case: Eva Jean Beamon Debtor First Name Middle Name Last Name Willie Beamon Jr. Debtor 2 (Spouse If filing) Middle Name Last Name 2334 United States Bankruptcy Court for the: Northern District of Illinois Case number ☐ Check if this is an (If known) amended filing Official Form 106G Schedule G: Executory Contracts and Unexpired Leases 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. Person or company with whom you have the contract or lease State what the contract or lease is for 2.1 Name Number Street City State ZIP Code 2.2 Name Number Street City State ZIP Code Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5

Name

Number

City

Street

State

ZIP Code

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Debtor 1

Jean

Document

First Name Middle Name

Last Name

Case number (if known)\_



## **Additional Page if You Have More Contracts or Leases**

		on o	compan	y with wh	om yo	u have the co	entract or lease		What the contract or lease is for
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	nformation to identify y	our case:	ment Page 4	2.01 64	
Debtor 1	Eva	Jean	Beamon		
Debtor 2	First Name Willie	Middle Name	Last Name		
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Inited States	Bankruptcy Court for the: N	orthern District of Illinois	3		
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☑ No	ave any codebiols: (ii )	ou are filing a joint case,	do not list either spouse	as a codebtor.)	
☐ Yes					
Within th	e last 8 years, have you	lived in a community p	roperty state or territor	y? (Community property states a	and territories include
, <u>_</u> , .	Jalifornia, Idaho, Louisiar o to line 3.	na, Nevada, New Mexico,	Puerto Rico, Texas, Wa	shington, and Wisconsin.)	termono molado
		pouse, or legal equivalen	A Book of the control of		
□ No		pouse, or legal equivalen	it live with you at the time	<del>)</del> ?	
		ate or territory did you liv	e?	Fill in the name and current ac	la en .
	ŕ	and you no	·	Fui in the name and current ac	dress of that person.
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Debtor 1

Jean Middle Name

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Case number (# known)

:	Column	1: Your codebtor	Column 2: The creditor to whom you	owe the debt
3			Check all schedules that apply:	
	Name		Schedule D, line	
			☐ Schedule E/F, line	
	Number	Street	☐ Schedule G, line	
1	City	State	ZIP Code	
	Name		Schedule D, line	
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	Number	Street	Schedule E/F, line	
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	City	State	ZIP Code	
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			☐ Schedule E/F, line	
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Case 16-12046 Doc 1 Filed 04/08/16 Entered 04/08/16 13:58:45 Desc Main Page 44 of 64 Document Fill in this information to identify your case: Eva Jean Debtor 1 Beamon First Name Last Name Willie Beamon Jr. Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois -Check if this is: (If known) ☐ An amended filing A supplement showing postpetition chapter 13 income as of the following date: Official Form 1061 MM / DD / YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Employment** 1. Fill in your employment information. **Debtor 1** Debtor 2 or non-filing spouse If you have more than one job, attach a separate page with **Employed Employment status** information about additional **E**mployed employers. ☐ Not employed ■ Not employed Include part-time, seasonal, or self-employed work. Occupation Occupation may include student or homemaker, if it applies. Employer's name Employer's address Number Street Number Street City State ZIP Code City State ZIP Code How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. 0.00 0.00 3. Estimate and list monthly overtime pay. 0.00 0.00 3. Calculate gross income. Add line 2 + line 3. 0.00 0.00

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Debtor 1

Jean

Document 1

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Case number (if know First Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here..... 0.00 0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 0.000.00 5b. Mandatory contributions for retirement plans 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 5d. Required repayments of retirement fund loans 0.00 5d. 0.00 5e. Insurance 5e. 0.000.00 5f. Domestic support obligations 0.00 0.00 5f. 0.00 5g. Union dues 0.00 5g. 5h. Other deductions. Specify: 0 5h. 0.00 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 0.00 0.007. Calculate total monthly take-home pay. Subtract line 6 from line 4. 0.00 0.00 8. List all other income regularly received; 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 0.00 monthly net income. 8a 8b. Interest and dividends 0.00 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 0.00 settlement, and property settlement. 8c 8d. Unemployment compensation 0.00 8d. 0.00 8e. Social Security 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8.00 8.00 8f. 8g. Pension or retirement income 701.00 1,109.00 8g. 8h. Other monthly income. Specify: \_ 8h. 0.00 0.009. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 709.00 <u>1,117.00</u> 10. Calculate monthly income. Add line 7 + line 9. 709.00 1,117.00 1,826.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 1,826,00 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? M No. Yes, Explain:

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Fill in this information	to identify your case:		J			
Debtor 1 Eva	Jean	Beamo	n	<b>0</b> 1		
Debtor 2 Willie	Middle Name	Last Name Beamo	n Ir	Check if this is:		
(Spouse, if filing) First Name	Middle Name	Last Name	II UI.	An amended	_	
United States Bankruptcy Co	ourt for the: Northern District of Illin	nois			nt showing pos of the followin	tpetition chapter 13
Case number(If known)				MM / DD / YY		g date.
				WIWI 7 007 11	' '	
Official Form 10	06J J: Your Expens					
Be as complete and accu	rate as possible. If two married	d people are fil	ing together, both	are equally respon ny additional pages,	sible for supply write your nam	ring correct ne and case number
Part 1: Describe	our Household					
f. Is this a joint case?						
☐ No. Go to line 2. ☐ Yes. Does Debtor 2	live in a separate household?					
☑ No						
☐ Yes. Debtor	2 must file Official Form 106J-2,	Expenses for S	eparate Household	d of Debtor 2.		
Do you have dependen	ts? V No	//	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this each dependent.		Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
Do not state the dependenames.						□ No
names.						Yes
						☐ No ☐ Yes
						□ No
						☐ Yes
			15.00		<del></del>	☐ No
						Yes
					······	☐ No ☐ Yes
Do your expenses inclu- expenses of people other yourself and your deper	er than					
	r Ongoing Monthly Expens			· · · · · · · · · · · · · · · · · · ·		
- Carrier						
expenses as of a date after applicable date.	s of your bankruptcy filing date r the bankruptcy is filed. If this	is a suppleme	e using this form ntal <i>Schedule J</i> , c	as a supplement in heck the box at the	a Chapter 13 ca top of the form	ase to report and fill in the
nclude expenses paid for	with non-cash government ass	sistance if you	know the value of	•		
uch assistance and have	included it on Schedule I: You	r Income (Offic	ial Form 106l.)		Your expen	ses
<ul> <li>The rental or home own any rent for the ground o</li> </ul>	ership expenses for your resid r lot.	dence. Include f	irst mortgage payn	nents and 4,	\$	300.00
If not included in line 4:	:					
4a. Real estate taxes				4a.	\$	0.00
	er's, or renter's insurance			4b.	\$	27.00
	, repair, and upkeep expenses			4c.	\$	0.00
4d. Homeowner's assoc	ciation or condominium dues			4d.	\$	0.00

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Debtor 1

Eva First Name

Jean

Middle Name

Beamon

Case number (if known)\_\_\_

			Your ex	(penses
:	5. Additional mortgage payments for your residence, such as home equity loans	5,	\$	0.00
	5. Utilities:	O.		
	6a. Electricity, heat, natural gas	6a.	¢.	81.00
	6b. Water, sewer, garbage collection	6b.	Φ	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	φ	86.00
	6d. Other. Specify: 0	6d.	¢	0.00
7	Food and housekeeping supplies	7.	\$	514.00
8	Childcare and children's education costs	8.	¢	0.00
9	Clothing, laundry, and dry cleaning	9.	Ф	25.00
10	Personal care products and services	10.	Ψ Φ	40.00
11		11.	\$\$	
12.	Transportation. Include gas, maintenance, bus or train fare.	11.	Φ	
	Do not include car payments.	12.	\$	360.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15,				**************************************
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	116.00
	15b. Health insurance	15b.	\$	104.00
	15c. Vehicle insurance	15c.	\$	54.00
	15d. Other insurance. Specify: $0$	15d.	\$	0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 0	16.	\$	0.00
17.				
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17a. 17b.	\$	0.00
	17c. Other, Specify: 0		\$	
	17d. Other. Specify: 0	17c.	\$ \$	
18		17d.	Ψ	0.00
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		<b>Ф</b>	0.00
	Specify: 0	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		Ψ	0.00
	20a. Mortgages on other property		\$	0.00
	20b. Real estate taxes	20a.	· -	
	20c. Property, homeowner's, or renter's insurance	20b.	\$	
	20d. Maintenance, repair, and upkeep expenses	20c.	\$	
	20e. Homeowner's association or condominium dues	20d.	\$	
		20e.	\$	0.00

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Debtor :	Eva First Name	Je Middle Name	ean Last Name	Beamon	Case number (##	(nown)		
21. <b>Oth</b>	ner, Specify:			A STATE OF THE STA		21.	+\$	0.00
22. <b>Cal</b>	culate your moi	nthly expenses.					, , , , , , , , , , , , , , , , , , ,	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
22a	. Add lines 4 thro	ough 21.				22a.	\$	1,811.00
<b>22</b> b	. Copy line 22 (n	nonthly expenses f	or Debtor 2), if a	ny, from Official Form 106	6J-2	22b.	\$	0.00
220	. Add line 22a an	nd 22b. The result i	s your monthly e	expenses.		22c.	\$	1,811.00
23. Calc	ulate your mont	thly net income.						
23a.	Copy line 12 (y	our combined mor	nthly income) fro	m Schedule I.		23a.	\$	1,826.00
23b.	Copy your mon	thly expenses from	n line 22c above			23b.	-\$	1,811.00
23c.	Subtract your n	nonthly expenses f	rom your monthi	y income.				
		ur monthly net inc				23c.	\$	15.00
For e	xample, do you e gage payment to	expect to finish pay increase or decrea	ving for your car ase because of a	nses within the year after loan within the year or do a modification to the terms	you expect your of your mortgage?			
☐ Ye		ere:						
	:							

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	Document	1 agc 49 01 04		
Fill in this information to identi	fy your case:			
Debtor 1 Eva	Jean Beamor	n		
First Name Debtor 2 Willie	Middle Name Last Name Beamor	Check if the	nis is:	
(Spouse, if filing) First Name	Middle Name Last Name	An am	ended filing	
United States Bankruptcy Court for the	e: Northern District of Illinois	A supp expens	element showing pos ses as of the following	stpetition chapter 13
Case number (if known)			D / YYYY	
Official Form 106J-2	)	····		
Schedule J-2:	Expenses for Sepa	ırate Household	of Debtor	2 12/15
only with respect to expenses for	trate household expenses ONLY IF D indents in common, list the dependen or Debtor 2 that are not reported on So this form. On the top of any additional	its on both Schedule J and this :	form. Answer the qu	uestions on this form
Do you and Debtor 1 maintain s	separate households?			
No. Do not complete this for Yes	orm.			
Do you have dependents?	No		A	
Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
dependent of Debtor 1 on Schedule J.			· · · · · · · · · · · · · · · · · · ·	☐ No ☐ Yes
Do not state the dependents' names.		***************************************		☐ No ☐ Yes
				☐ Yes
				Yes
				☐ No
			**************************************	Yes
		Att. American American		□ No
Do your expenses include expenses of people other than yourself, your dependents, and	□ No □ Yes			☐ Yes
Debtor 1?				
rt 2: Estimate Your Ongo	ing Monthly Expenses			************
200.00	bankruptcy filing date unless you ar	rouging this form as a surely		
penses as of a date after the bar	nkruptcy is filed.	re daing this form as a supplem	ent in a Unapter 13 c	ase to report
clude expenses paid for with nor	n-cash government assistance if you	know the value of		
ch assistance and have included	l it on Schedule I: Your Income (Offic	cial Form 106l.)	Your exper	nses
The rental or home ownership e any rent for the ground or lot.	expenses for your residence. Include	first mortgage payments and	\$	Barket menten mengengangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan pen
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or re				
4c. Home maintenance, repair, a	and upkeep expenses			
4d Homeowner's association or	popularitation of			

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Debtor 1 Eva Jean Beamon Case number (if known)\_\_\_\_\_

			Your expenses
	5. Additional mortgage payments for your residence, such as home equity loans	5.	нестипинорительной выпирационного положений положении положений положений положений положений положений положений п
	6. Utilities:	0.	
	6a. Electricity, heat, natural gas	60	<b>c</b>
	6b. Water, sewer, garbage collection	6a 6b	***************************************
	6c. Telephone, cell phone, Internet, satellite, and cable services		
	6d. Other. Specify:	6c.	\$
	7. Food and housekeeping supplies	6d.	\$
	8. Childcare and children's education costs	7.	\$
Ş	9. Clothing, laundry, and dry cleaning	8,	\$
10		9.	\$
11		10.	\$
12		11.	\$
	Do not include car payments.	12.	\$
13	Entertainment, clubs, recreation, newspapers, magazines, and books		
14		13.	\$
15		14.	\$
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	45.	•
	15b. Health insurance	15a.	
	15c. Vehicle insurance	15b.	\$
	15d. Other insurance, Specify:	15c.	\$
		15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other, Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deal at		
	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		Ψ
	Specify:	40	Φ.
20.		19.	\$
٠.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco	me.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Case 16-12046 Doc 1 Filed 04/08/16 Entered 04/08/16 13:58:45 Desc Main Page 51 of 64 Document Eva Jean Debtor 1 Beamon Case number (if known)\_ First Name Middle Name Other, Specify: 22. Your monthly expenses. Add lines 5 through 21. The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2. 22. 23. Line not used on this form,

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.		
Yes.	Explain here:	
		1
	***************************************	

Case 16-12046 Doc 1 Filed 04/08/16 Entered 04/08/16 13:58:45 Desc Main Document Page 52 of 64 Fill in this information to identify your case: Eva Jean Debtor 1 Beamon Middle Name Last Name Willie Debtor 2 Beamon Jr. (Spouse, if fiting) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois -Case number (If known) ☐ Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? MZ No ☐ Yes. Name of person\_ . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 1

Date 04 08 20/6

X Willie Beamon J. Signature of Debtor 2

Date OF OF 2016

Case 16-12046 Doc 1 Filed 04/08/16 Entered 04/08/16 13:58:45 Desc Main Document Page 53 of 64 Fill in this information to identify your case: Eva Jean Debtor 1 Beamon First Name Last Name Willie Debtor 2 Beamon Jr (Spouse, if fiting) First Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Give Details About Your Marital Status and Where You Lived Before Part 1: 1. What is your current marital status? Married Married ☐ Not married 2. During the last 3 years, have you lived anywhere other than where you live now? Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2: Dates Debtor 2 lived there lived there Same as Debtor 1 Same as Debtor 1 From \_\_\_ Number Street Tο Τo City State ZIP Code City State ZIP Code ☐ Same as Debtor 1 Same as Debtor 1 From \_\_\_ Number Τo To City State ZIP Code City State ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property

states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

🗹 No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2:

**Explain the Sources of Your Income** 

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Debtor 1	Eva First Name		Document amon Name	Page 54 0f 64	umber (# known)	
Fill i If yo	n the total amo ou are filing a joi	unt of income you receive int case and you have inc	nt or from operating a bu ed from all jobs and all busi ome that you receive toget	nesses, including part-t		ndar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	1 of current year until iled for bankruptcy:	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$	Wages, commissions, bonuses, tips Operating a business	\$
	For last calen (January 1 to E	dar year: December 31, <u>2015</u>	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
		dar year before that: December 31,2014	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
Inclu uner	ide income regand	ardless of whether that inc other public benefit payn	nents; pensions; rental inco	of other income are alinome; interest; dividends	mony; child support; Social S ; money collected from lawsu red together, list it only once	uits; royalties; and
List	each source an	d the gross income from	each source separately. Do	o not include income tha	at you listed in line 4.	
	No Yes. Fill in the d	etails.	Sequence of the contractive contractive contractive for the contractive contra		<ul> <li>Balifa Sharasam Videna umana Arabiba Vidala umanni mahani Nayana damana umana umana damana damana damana damana umana damana dama damana damana damana</li></ul>	e eksperad etiller kirkensis kriva, aksikensis kirkensis kriveninnin sesilik krivansis kriveninnin sesilik kri
			Debtor 1		Debtor 2	
*			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		y 1 of current year until filed for bankruptcy:	Railroad Penison	\$	Railroad Pension	\$4,436.00 \$

For last calendar year:

(January 1 to December 31

For the calendar year before that:
(January 1 to December 31,2014

4,907.00 Railroad Pension

7,241.00 Railraod Pension

71.82

Railroad Pension

S.S.I.

S.S.I.

13,314.00

13,380.00

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Dehi	Or.	1

Eva	Jean	Beamon	
First Name	Middle Name Last Nam		Case number (if known)

	er Debtor 1's or Debtor 2's debts primarily	consumer del	bts?		
☑ No.	Neither Debtor 1 nor Debtor 2 has primaril "incurred by an individual primarily for a personal persona	y consumer d	lebts. Consumer debts a	are defined in 11 U.S.C. § 10	01(8) as
	During the 90 days before you filed for bankru	ptcy, did you	pay any creditor a total o	of \$6,425* or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom you total amount you paid that creditor. Child support and alimony. Also, do not be the child support and alimony.	ot include pay	payments for domestic s ments to an attorney for	Support obligations, such as this bankruptcy case.	
_	* Subject to adjustment on 4/01/19 and every			after the date of adjustment	
	Debtor 1 or Debtor 2 or both have primarily				
	During the 90 days before you filed for bankru	ptcy, did you p	ay any creditor a total o	f \$600 or more?	
	☑ No. Go to line 7.				
	alimony. Also, do not include paymen	Dates of payment	Total amount paid	Amount you still owe	Was this payment fo
			\$	\$	<b>[</b>
	Creditor's Name		· · · · · · · · · · · · · · · · · · ·	7	☐ Mortgage ☐ Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendo
	City State ZIP Code				Other
	Creditor's Name		\$	\$	☐ Mortgage
	Creditor's Name				Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendo
	City State ZIP Code				Other
	Creditor's Name		\$	_ \$	☐ Mortgage
					Car
	Number Street				Credit card
	Number Street				Credit card Loan repayment Suppliers or vendor

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State

Cas Main

Beamon

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Case number (# known)

ithin 1 year before you filed for bank st all such matters, including personal id contract disputes.	«ruptcy, were you a party in any injury cases, small claims actions	/ lawsuit, court action, or ad , divorces, collection suits, pa	ministrative proceternity actions, sup	eeding? oport or custody modific
No Yes. Fill in the details.				
Too. I ill ill tild delails.	Nature of the case	Court or agency		Status of the case
Case title				D Pending
COSE INC		Court Name		On appeal
	***************************************	Number Street		Concluded
Case number	MANIFO MANIFORM			
		City 5	State ZIP Code	***************************************
0 194	;			П
Case title	THE TANKS OF THE T	Court Name		Pending On appeal
Astronomic and the second seco	·	Number Street		Concluded
Case number				_ 33.0.0.033
484 444 444 444 444 444 444 444 444 444		City	itate ZIP Code	
No. Go to line 11. Yes. Fill in the information below.	below.			,,
	Describe the prop	erty	Date	
Yes. Fill in the information below.		erty		Value of the proper
	Describe the prop			
Yes. Fill in the information below.	Describe the prop			Value of the proper
Yes. Fill in the information below.	Describe the prop	pened		Value of the proper
Yes. Fill in the information below.	Explain what happ  Property was	pened s repossessed.		Value of the proper
Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happ  Property was  Property was	pened s repossessed. s foreclosed. s garnished.		Value of the proper
Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happ Property was Property was Property was Property was	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Date	Value of the proper
Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happ  Property was  Property was	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.		Value of the proper
Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happ Property was Property was Property was Property was	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Date	Value of the prope
Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happ Property was Property was Property was Property was	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Date	Value of the proper
Yes. Fill in the information below.  Creditor's Name  Number Street  City State 2	Explain what happ Property was Property was Property was Property was	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Date	Value of the proper  \$  Value of the prope
Yes. Fill in the information below.  Creditor's Name  Number Street  City State 2	Explain what happ Property was Property was Property was Property was	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Date	Value of the proper  \$  Value of the proper
Yes. Fill in the information below.  Creditor's Name  Number Street  City State 2	Explain what happ Property was Property was Property was Property was Property was Property was Explain what happ	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Date	Value of the proper
Yes. Fill in the information below.  Creditor's Name  Number Street  City State 2	Explain what happ Property was Property was Property was Property was Property was Property was Explain what happ	s repossessed. s foreclosed. s garnished. s attached, seized, or levied. erty  ened s repossessed. s foreclosed.	Date	Value of the proper

Eva

Debtor 1

Jean

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e you owed a debt?			
escribe the action the creditor took		Date action	Amount
		was taken	Anount
			\$
	_		Ψ
ast 4 digits of account number: XX)	(X-		
and you give any gitts with a total	value of more than \$600	per person?	
scribe the gifts	C	Pates you gave ne gifts	Value
scribe the gifts	C	Pates you gave	Value
the Control of the Control	C	Pates you gave	
the Control of the Control	C	Pates you gave	Value
the Control of the Control	C	Pates you gave	
the Control of the Control	C	Pates you gave	\$
the Control of the Control	C	Pates you gave	\$
the Control of the Control	C	Pates you gave	\$
the Control of the Control	C	Pates you gave	\$
the Control of the Control	C	Pates you gave	\$
	C	Pates you gave	\$
	ti	Pates you gave	\$
scribe the gifts		ates you gave ne gifts	\$ \$
scribe the gifts	D	Pates you gave ne gifts	\$ \$
scribe the gifts	D	Pates you gave ne gifts	\$ \$
scribe the gifts	D	Pates you gave ne gifts	\$
scribe the gifts	D	Pates you gave ne gifts	\$\$  Value
scribe the gifts	D	Pates you gave ne gifts	\$
	ast 4 digits of account number: XXX vas any of your property in the polan, or another official?	ast 4 digits of account number: XXXX	ast 4 digits of account number: XXXX

Debtor 1

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	Eva	•	Jean	Beamon	Case number (if known)		
	First Name	Middle Name	Las	st Name	The state of the s		
Witl	hin 2 vears befor	re vou filed fo	or hankru	ptcy, did you give any gifts or con	irihutiana with a tatal walio	-6	000 4
		o you mean	or bankiu	picy, aid you give any gins or con	cributions with a total value	or more than \$	buu to any charity?
ليا	Yes. Fill in the de	tails for each	gift or con	itribution.			
	Gifts or contribut	tions to chariti	es	Describe what you contributed		Date you	Value
	that total more th	an \$600				contributed	value
				1	· · · · · · · · · · · · · · · · · · ·		
	Charity's Name			• *			\$
				•			\$
i	Number Street	***************************************		- -			
	stufficer Street						
-	City State	ZIP Code					
				the entered of the en			
6	List Certa	in Losses					
	List Verta	III EUSSES					
Vith	ain 1 year hoforo	you filed for	r hanlerini	for an almost rest filed for both of	. 193		
/Itr	in 1 year before	you filed for	bankrupi	tcy or since you filed for bankrupte	cy, did you lose anything be	cause of theft,	fiге, other
Isa	ister, or gamblin	g?					
1	No						
	Yes. Fill in the det	taile					
	res. Finantiae dec	ans.					
	Describe the prop	ertv vou lost a	nd	Describe any insurance coverage for	ur the lace	D-4 £	Walter of any of
	how the loss occu			· ·		Date of your loss	Value of property
		ırrea		Include the amount that insurance has			lost
		ırrea	•	claims on line 33 of Schedule A/B: Pro	pard. List pending insurance		lost
ı'		ırrea	; 	claims on line 33 of Schedule A/B: Pro	perty.		lost
		irrea	······································	claims on line 33 of Schedule A/B: Pro	perty.		lost
			· <u>-</u>	claims on line 33 of Schedule A/B: Pro	perty.		lost \$
		irred	: <u>.</u>	claims on line 33 of Schedule A/B: Pro	perty.		lost \$
The second section of the second seco		irred		claims on line 33 of Schedule A/B: Pro	perty.	n ver fresholmster	lost \$
7-				claims on line 33 of Schedule A/B: Pro	perty.	an Pers Pers Production of August 1997	lost \$
7:				claims on line 33 of Schedule A/B: Pro	perty.	an exercise de la constitución d	lost \$
	List Certain	) Payments	or Tran	claims on line 33 of Schedule A/B: Pro	perty.	for any property	\$
/ith	List Certain	Payments	or Trans	claims on line 33 of <i>Schedule A/B: Pro</i> sfers cy, did you or anyone else acting o	on your behalf pay or trans:	er any property	\$
ith ou	List Certain in 1 year before consulted about	Payments you filed for seeking bar	or Trans bankrupt	sfers  cy, did you or anyone else acting or preparing a bankruptcy petition	on your behalf pay or trans		\$
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	First Name Middle Nam					
	THOUSE TEAT	ne Last P	lame	Case number (#		
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			Description and value of any p	roperty transferred	Date payment or transfer was made	Amount of payment
Ē	Person Who Was Paid			***************************************		
			•		F0010=1	\$
N	lumber Street					
			÷		APRIL 1994	\$
			1 : : : : : : : : : : : : : : : : : : :			
Ci	ity State	ZIP Code				
Ēr	mail or website address					
			•			
Pe	erson Who Made the Payment, if	f Not You				
No Yes	s. Fill in the details.					
			Description and value of any pr	operty transferred	Date payment or transfer was	Amount of pay
Pe	erson Who Was Paid				made	
Ni	umber Street				- American	\$
Ni.	umber Street	:			**************************************	\$ \$
 Cii	ity State  2 years before you filed	d for bankrupte	cy, did you sell, trade, or othe usiness or financial affairs?	erwise transfer any prop	erfy to anyone, other tha	\$n property
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₩ No	40		· dano	, , , , , , , , , , , , , , , , , , ,	nown)	
☑ No	40					
☑ No	To years before you	filed for bankru	ptcy, did you transfer any prope	erty to a self-settled tru	ist or similar davias st	
	eneficiary? (These ar	re often called as	sset-protection devices.)	ary to a sen-settled tru	ist or similar device of	which you
Yes						
	s. Fill in the details.					
			Description and value of the aver-	anti-ti-		
			Description and value of the prop	erry transferred		Date transfer was made
	4.					
Nam	ne of trust					
			1900 mile dans derived to the profession of the			
1 8: L	ist Certain Financ	cial Accounts	, Instruments, Safe Deposi	Boxes, and Storag	e Units	
Within 1	1 year before you file	ed for bankrupto	y, were any financial accounts			banofit
olosca,	soid, moved, or trail	isierreu?				
nciude brokera	checking, savings, r	noney market, o	or other financial accounts; cert tives, associations, and other fi	ificates of deposit; sha	ares in banks, credit un	ilons,
Ø No	ge meaded, pension	idilas, cooperai	lives, associations, and other fi	nancial institutions.		
	Fill in the details.					
			Last 4 digits of account number	Time of a con-	<b>.</b> .	
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance befo closing or transfe
Name	e of Financial Institution		yyaa.			
-			xxxx	Checking		\$
-	e of Financial Institution		xxxx	☐ Savings		\$
-			xxxx	☐ Savings ☐ Money market		\$
-		e ZIP Code	XXXX	Savings  Money market  Brokerage		\$
Numi	ber Street	: ZIP Code	XXXX	☐ Savings ☐ Money market		\$
Numl	ber Street State	: ZIP Code		Savings  Money market  Brokerage  Other		\$
Numl	ber Street	: ZIP Code	xxxx	Savings  Money market  Brokerage  Other  Checking	Total Control	\$\$
City	ber Street State	: ZIP Code		Savings  Money market Brokerage Other Checking Savings		\$ \$
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Eva

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	Eva First Name	Jean Middle Name	Beamon	Cas	se number (if known)		***************************************
22. Have	you stored prop	perty in a storage un	it or place other than your hon	ne within 1 vear	before you filed for	· hankruntov?	
CL N	0		•		o o o o o o o o o o o o o o o o o o o	bankraptcy:	
U Y	es. Fill in the de	tails.					
			Who else has or had access t	to it?	Describe the conten	ts	Do you still have it?
	Nome of State 5	-2					□ No
	Name of Storage Fac	ситу	Name				☐ Yes
	Number Street		Number Street		:		: : :
			City State ZIP Code		: !		:
	City	State ZIP Code	_				:
					:		•
Part 9:	Identify F	roperty You Hold	l or Control for Someone E	ilse			
23. Do y	ou hold or contr	ol any property that	someone else owns? Include	any property vo	ou borrowed from a	ra storina for	
orpo	n trust for sc	omeone.		any property ye	ou borrowed from, a	re storing for,	
O V							
₩ Y	es. Fill in the de	tails.					
			Where is the property?		Describe the property	<b>!</b> 	Value
•	A						*
,	Owner's Name						\$
Ī	Number Street		Number Street	:			
i	Number Street		Number Street				
-				710.0			
-	Number Street	State ZIP Code	Number Street  City State	ZIP Code			
	City			ZIP Code			
Part 10	City Give Deta	ils About Envîron	City State  mental information	ZIP Code			
Part 10	Give Deta	ils About Environ	City State  mental information  initions apply:				
Part 10: For the p	Give Deta surpose of Part 1 conmental law medous or toxic su	ils About Environ  10, the following defeans any federal, states to the stances, wastes, or	mental information  initions apply: ate, or local statute or regulation or material into the air, land, so	on concerning p	r groundwater or o	tion, releases o	of
Part 10	Give Deta ourpose of Part 1 onmental law medous or toxic su ding statutes or neans any location	ils About Environ  10, the following defeans any federal, states of the stances, wastes, or regulations controllion, facility, or prope	city State  mental information  initions apply: ate, or local statute or regulation	on concerning p il, surface wate ances, wastes,	er, groundwater, or o or material.	other medium,	of
For the part includes Site mutilize	Give Deta  ourpose of Part 1  onmental law me dous or toxic su ling statutes or neans any location it or used to ow dous material me	ils About Environ  10, the following defeans any federal, states that ances, wastes, coregulations controllion, facility, or property, operate, or utilizate ans anything an er	mental information  initions apply: ate, or local statute or regulation material into the air, land, so ing the cleanup of these substituty as defined under any envirole it, including disposal sites.	on concerning p il, surface wate ances, wastes, onmental law, v	er, groundwater, or o or material. whether you now ow	other medium, n, operate, or	of
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or 1 E.Vd Je8 First Name Middle Name		Case number (# known)	
WILLIAM WILLIAM	Last Name	<del></del>	
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	I unit of any release of hazardous ma	terial?	
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Yes. Fill in the details.	_		
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An officer, director, or manag			
An owner of at least 5% of the	voting or equity securities of a corp	pration	
No. None of the above applies. G			
	nd fill in the details below for each be	einace	
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	***************************************		Jean	Beamon	Case number (if known)
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